

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-876)

SERIAL NO.

10/018572

FILING DATE

APPLICANT(S)

CLAIMS

·	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		IND.	DER.	IND.	DER.	IND.	DER.
	IND.	DEP.	IND.	DER.	IND.	DER.						
1	/		/		/							
2	/		/		/							
3	/		/		/							
4	/											
5	/		2		/							
6	/		2		/							
7	6		CD		/							
8	1		CD		/							
9	/		/		/							
10	/		/		/							
11	/											
12	2											
13	2											
14	CD											
15	CD											
16	/											
17	/											
18	/											
19	4											
20	3											
21												
22												
23												
24												
25												
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27												
28	1											
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45												
46												
47												
48												
49												
50												
TOTAL IND.	3		3		3							
TOTAL DEP.	25	↔	8	↔	6	↔						
TOTAL CLAIMS	28		17		9							

* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS